

STATE OF CONNECTICUT  
DEPARTMENT OF HEALTH SERVICES  
BUREAU OF HEALTH SYSTEM REGULATION  
DIVISION OF MEDICAL QUALITY ASSURANCE

Rec'd  
9-21-88  
JB  
Davis PL.  
Process

In re:

Robert Stein, D.P.M.

Petition No. 871102-19-006

CONSENT ORDER

WHEREAS, Robert Stein of Coral Springs, Florida has been issued license number 000201 to practice as a podiatrist by the Department of Health Services pursuant to Chapter 375 of the General Statutes of Connecticut, as amended; and

WHEREAS, the Department of Health Services has alleged that from 1979 through 1984, Robert Stein submitted false claims to the Department of Health and Human Services for reimbursement under the medicare program; and

WHEREAS, if proven said act would constitute a violation of §20-59(3) of the Connecticut General Statutes; and

WHEREAS, Robert Stein does not admit to any violation of §20-59(3) of the Connecticut General Statutes, but desires to terminate this matter without further proceedings;

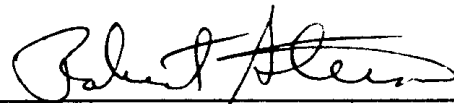
NOW THEREFORE, pursuant to §19a-17 and §20-59 of the Connecticut General Statutes, Robert Stein hereby stipulates and agrees to the following:

1. That he waives the right to a hearing on the merits of this matter.
2. That he hereby surrenders his license to practice podiatry. Said license shall be sent to the Department of Health Services, 150


Washington Street, Hartford, Connecticut 06106 along with this duly executed Consent Order.

3. That he will no longer practice podiatry in Connecticut.
4. That he hereby waives, abandons, and surrenders any such right or rights, as he may now or at any future time possess, to hold a podiatry license, including the right to make any future application to the Department of Health Services, or other authorized Connecticut State Agency, for such a license.
5. That if he applies to another state for a podiatry license he shall (1) notify the Connecticut Department of Health Services within seven days of said application and (2) provide the appropriate licensing board or agency in that state with a copy of this Consent Order.
6. That this Consent Order may be considered as evidence in any proceeding before the Connecticut Board of Examiners in Podiatry arising out of a subsequent series of facts (1) in which his compliance with this same order is at issue, or (2) in the event he should at any future time apply for such license or the renewal thereof or for the restoration of his eligibility to hold such license.
7. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, that said order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive him of any rights that he may have under the laws of the State of Connecticut or of the United States.

8. That he understands this Consent Order is a matter of public record.
  9. That this Consent Order is effective on the date said Consent Order is ordered and accepted by the Connecticut Board of Examiners in Podiatry.
  10. That he has consulted with an attorney prior to signing this document.
  11. This Consent Order shall not be construed as an admission of wrong doing.
- I, Robert Stein, have read the above Consent Order, and I agree and admit to the terms and allegations set forth therein. I further declare the execution of this Consent Order to be my free act and deed.

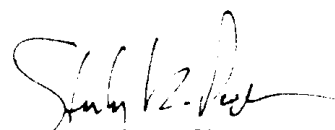
  
Robert Stein

Subscribed and sworn to before me this 25 day of July 1988.

  
Catherine W. Mathis  
Notary Public or person authorized  
by law to administer an oath or  
affirmation

NOTARY PUBLIC STATE OF CONNECTICUT  
MY COMMISSION EXPI. OCT. 5, 1991  
BONDED THROUGH GENERAL INS. CO.

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Health Services on the 26<sup>th</sup> day of August 1988, it is hereby accepted.

  
Stanley K. Peck, Director  
Division of Medical Quality Assurance

The above Consent Order having been presented to the duly appointed agent of the Connecticut Board of Examiners in Podiatry on the 7<sup>th</sup> day of September 1988, it is hereby ordered and accepted.

CONNECTICUT BOARD OF EXAMINERS IN PODIATRY



Irwin Kove, D.P.M.

For the Connecticut Board of Examiners in Podiatry

AH:pf  
co stein  
co25